

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State/Territory: Mississippi

COLLECTION OF ADDITIONAL REGISTRY INFORMATION

In addition to the requirements of 42 CFR 483.156(c) the nurse aide registry shall contain all the information listed on attachment 4.38, page 1.

TN No.	<u>93-17</u>	Approval Date	<u>2-18-94</u>	Effective Date	<u>10-1-93</u>
Supersedes		Date Approved	<u> </u>	HCFA ID:	
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